

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re Application of: Tomoharu SUGA, et al.

Examiner: Ahmed, Hasan Syed

Serial No.: 10/542,969

Group Art Unit: 1615

Filing Date: July 21, 2004

FOR: TABLET QUICKLY MELTING IN ORAL CAVITY

TRANSMITTAL OF SUPPLEMENTAL INFORMATION DISCLOSURE STATEMENT

Commissioner for Patents
United States Patent and Trademark Office
P.O. Box 1450
Alexandria, VA 22313-1450

Sir:

A Supplementary European Search Report has recently issued covering the European counterpart to the above application. A copy of that Supplementary Search Report, copies of the foreign references cited, and completed PTO forms PTO/SB/08A and PTO/SB/08B are enclosed herewith.

No fee is believed due from the filing of this document. If a fee is due, however, please deduct it from our Account No. 50-1561.

Dated: November 28, 2006

Respectfully submitted,

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Substitute for form 1479/BTO

INFORMATION DISCLOSURE STATEMENT BY APPLICANT

(Use as many sheets as necessary)

Sheet 1

of 3

Complete if Known

Application Number	10/542,969
Filing Date	July 21, 2005
First Named Inventor	Tomoharu SUGA
Art Unit	1615
Examiner Name	Ahmed, Hasan Syed
Attorney Docket Number	144342 02400

U.S. PATENT DOCUMENTS

FOREIGN PATENT DOCUMENTS

Examiner Signature _____ Date _____
Certified as true copy

EXAMINER'S initial reference considered, whether or not claim is in conformance with MPEP 608. Draw line through citation if not in conformance and not considered. Include copy of the form with next communication to applicant. Applicant's unique claim designation number (optional).² See *Kinds Codes of USPTO Patent Documents* at www.uspto.gov or MPEP 901.04. Enter Office that issued the document, by the two-letter code (WIPO Standard ST.3).³ For Japanese patent documents, indicate the year of the reign of the Emperor must precede the serial number of the patent document. *Kind of document* by the appropriate symbols as indicated on the document under WIPO Standard ST.16 if possible.⁴ Applicant is to place a check mark here if English language Translation is attached.

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Substitute for Form 1449/PTO				Complete if Known
INFORMATION DISCLOSURE STATEMENT BY APPLICANT				
(Use as many sheets as necessary)				
Sheet	2	of	2	Attorney Docket Number
				044342.024000

NON-PATENT LITERATURE DOCUMENTS

Examiner Signature	Date Considered	
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***EXAMINER:** Initial if reference considered, whether or not citation is in conformance with MPEP 609. Draw line through citation if not in conformance and not considered. Include copy of this form with next communication to applicant.

1 Applicant's unique citation designation number (optional). 2 Applicant is to place a check mark here if English language Translation is attached.

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